

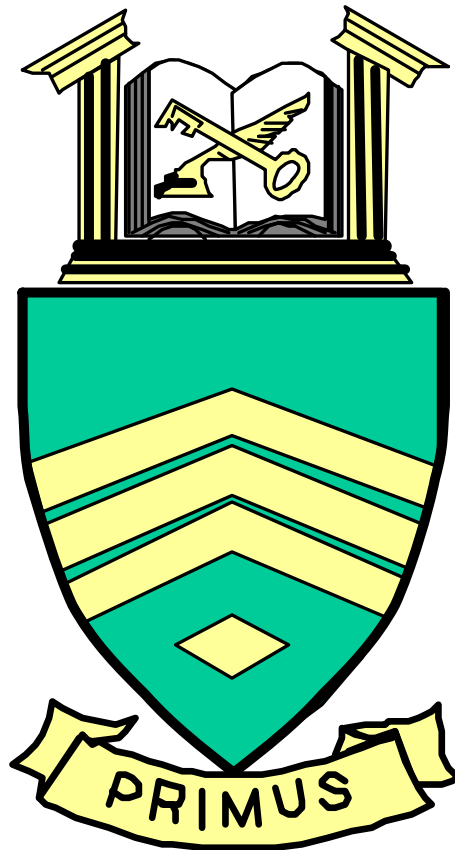
U.S. ARMY SERGEANTS MAJOR ACADEMY (FSC-TATS)

L669

OCT 03

SUPERVISE THE IMPLEMENTATION OF THE ARMY SUBSTANCE
ABUSE PROGRAM (ASAP)

TRAINING SUPPORT PACKAGE



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TRAINING SUPPORT PACKAGE (TSP)

TSP Number / Title	L669 / Army Substance Abuse Program
Effective Date	01 Oct 2003
Supersedes TSP(s) / Lesson(s)	L669, Alcohol and Drug Abuse Prevention and Control Program, May 01
TSP Users	400-521-SQIM, Phase II, Resident 400-521-SQIM, Phase II, (DL)
Proponent	The proponent for this document is the Sergeants Major Academy.
Improvement Comments	<p>Users are invited to send comments and suggested improvements on DA Form 2028, <i>Recommended Changes to Publications and Blank Forms</i>. Completed forms, or equivalent response, will be mailed or attached to electronic e-mail and transmitted to:</p> <p>COMDT USASMA ATTN ATSS D BLDG 11291 BIGGS FIELD FORT BLISS TX 79918-8002</p> <p>Telephone (Comm): (915) 568-8875 Telephone (DSN): 978-8875 e-mail: atss-dcd@bliss.army.mil</p>
Security Clearance / Access	Unclassified
Foreign Disclosure Restrictions	This product/publication has been reviewed by the product developers in coordination with the USASMA foreign disclosure authority. This product is releasable to students from all requesting foreign countries without restrictions.

PREFACE

Purpose

This Training Support Package provides the instructor with a standardized lesson plan for presenting instruction for:

<u>Task Number</u>	<u>Task Title</u>
081-831-9026	SUPERVISE THE IMPLEMENTATION OF THE ARMY'S ALCOHOL AND DRUG PREVENTION/CONTROL PROGRAM (ADAPCP)
400-012-6703	MONITOR UNIT ALCOHOL/DRUG ABUSE PROGRAM
400-012-6743	RECOMMEND SOLDIERS FOR ALCOHOL/DRUG ABUSE COUNSELING TO THE COMMANDER

This TSP
Contains

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**Army Substance Abuse Program (FSC RESIDENT)
L669 / Version 1
01 Oct 2003**

SECTION I. ADMINISTRATIVE DATA

All Courses Including This Lesson	<u>Course Number</u> 400-521 SQIM	<u>Version</u> 1	<u>Course Title</u> First Sergeant Course - The Army Training System (FSC - TATS)
Task(s) Taught (*) or Supported	<u>Task Number</u>	<u>Task Title</u>	
	081-831-9026 (*)	SUPERVISE THE IMPLEMENTATION OF THE ARMY'S ALCOHOL AND DRUG PREVENTION/CONTROL PROGRAM (ADAPCP)	
	400-012-6703 (*)	MONITOR UNIT ALCOHOL/DRUG ABUSE PROGRAM	
	400-012-6743 (*)	RECOMMEND SOLDIERS FOR ALCOHOL/DRUG ABUSE COUNSELING TO THE COMMANDER	
Reinforced Task(s)	<u>Task Number</u>	<u>Task Title</u>	
Academic Hours	The academic hours required to teach this lesson are as follows:		
	<u>Resident Hours/Methods</u>		
	1 hr 30 mins /Conference / Discussion		
	20 mins /Practical Exercise (Performance)		
Test	0 hrs		
Test Review	0 hrs		
Total Hours:	2 hrs		
Test Lesson Number	<u>Hours</u>	<u>Lesson No.</u>	
Testing (to include test review)	_____	N/A	
Prerequisite Lesson(s)	<u>Lesson Number</u>	<u>Lesson Title</u>	
	None		
Clearance Access	Security Level: Unclassified Requirements: There are no clearance or access requirements for the lesson.		
Foreign Disclosure Restrictions	This product/publication has been reviewed by the product developers in coordination with the USASMA foreign disclosure authority. This product is releasable to students from all requesting foreign countries without restrictions.		

References

<u>Number</u>	<u>Title</u>	<u>Date</u>	<u>Additional Information</u>
AR 600-85	ALCOHOL AND DRUG ABUSE PREVENTION AND CONTROL PROGRAM	15 Oct 2001	

Student Study Assignments

Before class--

- Read AR 600-85, chapters 1 thru 8, and skim App B.

During class--

- Participate in class discussion and complete/review PE.

After class--

- Turn in recoverable materials.

Instructor Requirements

1:14, FSC graduate, served as 1SG, ITC, SGITC, and VTT-ITC (VTT only) qualified.

1:16, At USASMA VTT site to operate the VTT equipment.

Additional Support Personnel Requirements

<u>Name</u>	<u>Stu Ratio</u>	<u>Qty</u>	<u>Man Hours</u>
One site coordinator at each VTT site to operate the TNET equipment and coordinate classroom instruction. Must be FSC grad, served as 1SG, ITC, and SGITC qualified. (Enlisted)	1:16	2	2 hrs

Equipment Required for Instruction

<u>ID Name</u>	<u>Stu Ratio</u>	<u>Instr Ratio</u>	<u>Spt</u>	<u>Qty</u>	<u>Exp</u>
441-06 LCD Projection System	1:14	1:1	No	1	No
6730-00-577-4813 SCREEN PROJECTION: BM-10	1:14	1:1	No	1	No
702101T134520 DELL CPU, MONITOR, MOUSE, KEYBOARD	14:14	1:1	No	1	No
7110-00-T81-1805 DRY ERASE BOARD	1:14	1:1	No	1	No
7510-01-424-4867 EASEL, (STAND ALONE) WITH PAPER	1:14	1:1	No	1	No
FSC-1 TNET COMMUNICATIONS EQUIPMENT SUITE (VTT LESSON ONLY)	1:16	1:1	No	1	No
FSC-2 TNET ROOM EQUIPMENT SUITE (VTT LESSON ONLY)	1:16	1:1	No	1	No

FSC-3 TNET AUDIO/VIDEO LINKAGE EQUIPMENT (VTT LESSON ONLY)	1:16	1:1	No	1	No
SNV1240262544393 36 - INCH COLOR MONITOR W/REMOTE CONTROL AND LUXOR STAND	1:14	1:1	No	1	No
SOFTWARE-2 WINDOWS XP, LATEST GOVERNMENT APPROVED VERSION	14:14	1:1	No	1	No
* Before Id indicates a TADSS					

**Materials
Required**

Instructor Materials:

- VGTs: 25.
- TSP.
- AR 600-85.

Student Materials:

- Pen or pencil and writing paper.
- All reference material issued for this lesson.
- AR 600-85.

**Classroom,
Training Area,
and Range
Requirements**

CLASSROOM XXI WITH T-NET CAPABILITY (VTT)
CLASSROOM, GENERAL PURPOSE, 600 SF, 16 PN

**Ammunition
Requirements**

<u>Id</u>	<u>Name</u>	<u>Exp</u>	<u>Stu Ratio</u>	<u>Instr Ratio</u>	<u>Spt Qty</u>
None					

Instructional Guidance

NOTE: Before presenting this lesson, instructors must thoroughly prepare by studying this lesson and identified reference material.

NOTE: Break the class into 3 groups/sites and assign each a discussion area. The groups will discuss and prepare a short briefing of their assigned areas. Each group should select a leader and a recorder to do their portion of the briefings. Areas of responsibility are:

- Group 1, ASAP mission/objectives, principles, eligibility, policies/controls (AR 600-85, para 1-30 through 1-33), alcohol sanctions (para 1-34) and ELO-B, para 1-26 and 1-27 (UPL responsibility).
- Group 2, ELOs, C (AR 600-85 Para 2-1 through 2-6h(3)), 4 (para 3 through 3-12a, b, c, d, and e), and 5 (para 4-1 through 4-10, App B, para B-8 and para 5-2 to 5-4).
- Group 3, ELOs F (para 6-3 through 6-5 and para 7-5), and G (para 8-1 through 8-4).

Before class--

- Conduct this lesson using the Small Group Instruction method and use the questions and VGTs provided to generate discussion among the students at the different sites.
- Read all TSP material.
- Issue AR 600-85.

During class--

- Cover all learning objectives.
- The facilitator may need to create additional questions to ensure student participation continues throughout the lesson material.
- The DL (VTT) instructor will select an appropriate site before asking a student a question.
- The instructor may use the questions and VGTs to generate discussion among the groups, if necessary. Allow 13 minutes to process the information and the allotted time for each ELO to accomplish the group requirements. At the 12-minute mark, remind the students that they have one minute to complete their briefing to the other groups.
- Ask the students to talk about the program as it relates to their unit or their own experiences.

After class--

- Collect recoverable material.
-

**Proponent
Lesson Plan
Approvals**

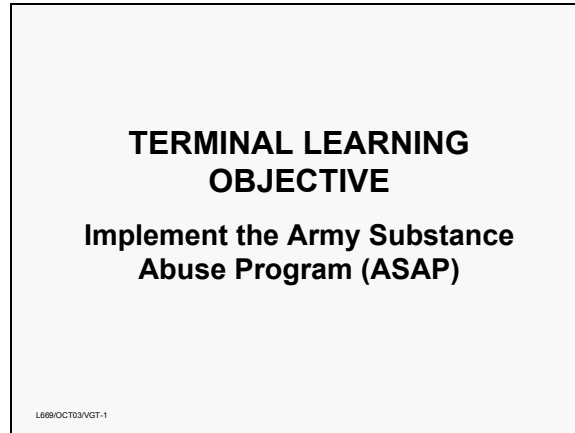
<u>Name</u>	<u>Rank</u>	<u>Position</u>	<u>Date</u>
Colyer, Donald J.	GS09	Training Specialist	
Graham, Kevin L.	MSG	Course Chief, FSC	
Gratton, Steven M.	SGM	Chief, Functional Courses	
Mays, Albert J.	SGM	Chief, CDDD	

SECTION II. INTRODUCTION

Method of Instruction: <u>Conference / Discussion</u>
Technique of Delivery: <u>Small Group Instruction (SGI)</u>
Instructor to Student Ratio is: <u>1:14</u>
Time of Instruction: <u>5 mins</u>
Media: <u>VGT-1</u>

Motivator

SHOW VGT-1, TERMINAL LEARNING OBJECTIVE



CAMERA: MAIN CAMERA ON THE INSTRUCTOR. ASK EACH SITE COORDINATOR AT THE DISTANCE LEARNING SITES IF THEY ARE PREPARED FOR TRAINING.

Commanders at all levels are responsible for the implementation of ASAP and the accomplishment of its objectives, including evaluation of the program and its impact within their organization. In order for the Army to be "fit to fight" and win the next battle, every soldier must operate at peak efficiency, both physically and mentally. There is no room in battle for soldiers who are unable to perform their combat missions due to incapacitation by alcohol or other drugs.

Unit first sergeants play an essential role in management of the unit ASAP. This lesson will assist you in ensuring your soldiers stay "fit to fight." It provides you the necessary training to implement and manage an effective unit ASAP.

REMOVE VGT-1

Terminal Learning Objective

NOTE: Inform the students of the following Terminal Learning Objective requirements.

At the completion of this lesson, you [the student] will:

Action:	Interpret unit Army Substance Abuse Program (ASAP).
Conditions:	As a first sergeant, in a classroom, given AR 600-85 and student handouts.
Standards:	Implement the Army Substance Abuse Program (ASAP) and pass a 40 question, written examination with a score of 70 percent or better IAW AR 600-85.

Safety Requirements

None

Risk Assessment Level

Low

Environmental Considerations

NOTE: It is the responsibility of all soldiers and DA civilians to protect the environment from damage.

Evaluation

At the end of this module, you will receive a 40-question written, objective examination. It will test your learning of the objectives from this and other lessons. To receive a GO (70 percent), you must answer 28 or more of the questions correctly.

Instructional Lead-In

ASAP is a personnel program that includes prevention, identification, education, and rehabilitation services. The program includes nonresidential and partial inpatient care program. The ASAP is responsive to the chain of command and supports the morale, safety, and combat readiness of the Army (AR 600-85, p 68). This lesson will acquaint you with the program and will make it easier for you, as 1SG, to deal with any drug and alcohol problem that you may encounter in your unit.

SECTION III. PRESENTATION

NOTE: Inform the students of the Enabling Learning Objective requirements.

A. ENABLING LEARNING OBJECTIVE

ACTION:	Identify the Army Substance Abuse Program (ASAP).
CONDITIONS:	As a first sergeant, in a classroom, given AR 600-85.
STANDARDS:	Identified the Army Substance Abuse Program (ASAP) IAW AR 600-85.

1. Learning Step / Activity 1. Identify the Army Substance Abuse Program.

Method of Instruction: Conference / Discussion

Technique of Delivery: Small Group Instruction (SGI)

Instructor to Student Ratio: 1:14

Time of Instruction: 10 mins

Media: VGT-2 thru VGT-9

NOTE: Ensure that the group leader states the ELO.

Group number one will now start with their portion of the assigned areas.

During the lead-in statement, I stated that ASAP is a program designed to prevent and control the abuse of drug and alcohol. These discussions will help us understand how ASAP does that.

NOTE: Use the following question to initiate the group discussion.

QUESTION: What are the ASAP mission and objectives?

ANSWER: ASAP's mission and objectives are: See VGT-2 and VGT-3.

NOTE: As a minimum, the student should cover the information on the slides. Encourage the students to paraphrase rather than read straight out of the regulation. The students should cite examples for each bullet.

SHOW VGT-2, ASAP MISSION/OBJECTIVES

ASAP MISSION/OBJECTIVES

- Increase individual fitness/unit readiness.
- Provide services that emphasize drug and alcohol deterrence, prevention, education and treatment.
- Implement alcohol/drug abuse risk reduction.
- Restore to duty substance-impaired soldiers who have potential for continued military service.
- Provide alcohol and drug-free leisure activities.

L68B/OCT03/VGT-2

Ref: AR 600-85, para 1-30

REMOVE VGT-2

SHOW VGT-3, ASAP MISSION/OBJECTIVES (cont)

ASAP MISSION/OBJECTIVES (cont)

- Ensure personnel assigned to ASAP staff are experienced and properly trained.
- Reduce alcohol and drug abuse by civilians to achieve maximum productivity and reduce absenteeism and attrition of civilians.
- Improve readiness by extending services to total Army.
- Ensure quality customer service.

L68B/OCT03/VGT-3

Ref: AR 600-85, para 1-30

NOTE: Allow the students to interact and exchange ideas and experiences.

REMOVE VGT-3

NOTE: Ensure the group understands that the ASAP is a command program that emphasizes readiness and personal responsibility (AR 600-85, para 1-31).

Ensure the students discuss the ASAP principles, VGTs 4 and 5.

SHOW VGT-4, ASAP PRINCIPLES

ASAP PRINCIPLES

- Alcohol/drug abuse are inconsistent with Army policy and standards.
- Commanders intervene early and refer suspected/identified soldiers to ASAP.
- ASAP participation is mandatory (Article 86 violation if not attended).
- Alcohol/drug abusers may be enrolled in ASAP.
- Failure to participate or successfully complete rehabilitation will result in administrative separation.

L689/OCT03/VGT-4

Ref: AR 600-85, para 1-31

REMOVE VGT-4

SHOW VGT-5, ASAP PRINCIPLES (cont)

ASAP PRINCIPLES (cont)

- ASAP addressed as single program.
- Commander retains authority to make decisions.
- ASAP available to civilians and dependents.
- Aggressive biochemical program serves as a deterrent to drug and alcohol abuse.
- High priority given to prevention/education.
- Commander will refer individuals involved in alcohol related workplace violence to ASAP.
- Law enforcement will not infiltrate nor solicit information from soldiers in ASAP.

L689/OCT03/VGT-5

Ref: AR 600-85, para 1-31

NOTE: Ensure the students discuss the (Second bullet) commander's authority to make personnel decisions, e.g., personnel separations, bar to reenlistment, and extension on active duty.

ASAP authorizes services for personnel who are eligible to receive military medical services or federal civilian employees occupational health services programs.

NOTE: Make sure that the students discuss the bullets on VGT-6.

SHOW VGT-6, ASAP ELIGIBILITY CRITERIA

ASAP ELIGIBILITY CRITERIA

- U.S. citizen DOD civilian employees.
- Foreign national employees with Status of Forces Agreement treatment arrangements.
- Retired military personnel.
- Family members of eligible personnel.
- Other service personnel when under control of an Army installation commander.
- ARNG/USAR not on active duty on a space/resource available basis.

L689/OCT03/VGT-6

Ref: AR 600-85, para 1-32

REMOVE VGT-6

NOTE: Use the following question to ensure the group discusses the Army's alcohol policies and controls.

QUESTION: What are the Army alcohol policies and controls?

ANSWER: Focus on all the bullets but ensure the soldiers discuss what unannounced unit inspections and alcohol testing can do (Bullet number five).

1. Promote military fitness, good order, and discipline.
2. Promotes safety.
3. Increase awareness of the effect alcohol consumption has on duty performance, health, and safety.
4. Prevent and deter alcohol abuse.
5. Assists in early identification and referral to the ASAP.

SHOW VGT-7, ALCOHOL POLICIES AND CONTROLS

ALCOHOL POLICIES AND CONTROLS

- Maintain workplace alcohol free.
- Alcohol abuse and misconduct not tolerated.
- Commanders must educate the soldiers about alcoholism and its effects.
- Commanders must identify soldiers that abuse alcohol and refer them for screening, prevention training, and treatment.
- Unannounced unit inspections and testing for alcohol.

L689/OCT03/VGT-7

Ref: AR 600-85, para 1-33

NOTE: The briefer should also discuss the fact that:

1. Commanders should confront all suspected alcohol abusers with the specifics of their behavior, performance, and conduct.
2. Self-referral does not take away accountability for alcohol related misconduct. Rehab failure requires initiation of separation action.
3. If soldiers identified as alcohol abusers wish to remain in the Army, they must successfully complete ASAP education or rehabilitation program.

Ref: AR 600-85, para 1-33.

REMOVE VGT-7

Now that we know the policies and controls, the group will now talk about the sanctions that can result due to drug and alcohol abuse.

NOTE: Allow the students to interact and cite some personal experiences.

SHOW VGT-8, ALCOHOL SANCTIONS

ALCOHOL SANCTIONS

- Administrative separation for misconduct involving alcohol, drunk on duty or DWI.
- Military on duty will not have alcohol blood level of .05 grams per 100 milliliters of blood.
- Detoxify and provide medical treatment to soldiers identified as alcohol dependent.

L989/OCT03/VGT-8

Ref: AR 600-85, para 1-34

REMOVE VGT-8

SHOW VGT-9, ILLEGAL DRUGS AND SANCTIONS

**ILLEGAL DRUGS AND
SANCTIONS**

**All soldiers, including Title 10 ARNG and USAR,
identified as drug abusers will:**

- **Be referred to ASAP for screening.**
- **Be processed for an administrative discharge
IAW AR 635-200 (except self referrals).**
- **Discharge IAW CH 14, AR 635-200 for drug
trafficking.**
- **Be considered for disciplinary action under
UCMJ.**

L889/OCT03/VGT-9

Ref: AR 600-85, para 1-35

REMOVE VGT-9

We will now discuss the commander's ASAP responsibilities.

CHECK ON LEARNING: A check on learning for this ELO and ELO B will follow after ELO B.

B. ENABLING LEARNING OBJECTIVE

ACTION:	Identify the commander's ASAP responsibilities.
CONDITIONS:	As a first sergeant, in a classroom, given AR 600-85.
STANDARDS:	Identified the commander's ASAP responsibilities IAW AR 600-85.

1. Learning Step / Activity 1. Identify the commander's ASAP responsibilities.
Method of Instruction: Conference / Discussion
Technique of Delivery: Small Group Instruction (SGI)
Instructor to Student Ratio: 1:14
Time of Instruction: 10 mins
Media: VGT-10 and VGT-11

NOTE: Have the group leader read the ELO before he or she starts the briefing.

As the first sergeant, one of your responsibilities is to ensure that the commander implements all of the programs that are necessary to run an effective company. The ASAP is one of those. In order to do that, you must know what his responsibilities to ASAP are. Group 1 will complete their portion of their briefing by discussing the commander's ASAP responsibilities.

NOTE: Encourage the students to present their briefings and relate any experiences they may have on this subject. Do not allow them to read the answer verbatim. As a minimum, have the students discuss the bullets on VGT-10 and VGT-11.

SHOW VGT-10, COMMANDERS OF COMPANIES/ DETACHMENTS WILL:

**COMMANDERS OF COMPANIES/
DETACHMENTS WILL:**

- Appoint officer or NCO (SGT or above) as Unit Prevention Leaders (UPL).
- Implement biochemical testing program.
- Implement ASAP prevention and education.
- Brief all new soldiers on ASAP policies and services.
- Maintain liaison with ASAP clinical and non-clinical personnel.

L669/OCT03/VGT-10

Ref: AR 600-85, para 1-26a through 1-26e

REMOVE VGT-10

SHOW VGT-11, COMMANDERS OF COMPANIES/DETACHMENT WILL (cont)

**COMMANDERS OF COMPANIES/
DETACHMENTS WILL: (cont)**

- Maintain ASAP elements while deployed.
- Support soldier risk reduction.
- Work with Risk Reduction Coordinator.
- Immediately report all offenses of illegal possession, use, or referral to the Provost Marshal.
- Assess program and provide feedback to the Risk Reduction Coordinator.

L669/OCT03/VGT-11

Ref: AR 600-85, para 1-26f through 1-26j

NOTE: Ask the following question to lead into the UPL areas.

QUESTION: What duties does the unit prevention leader (UPL) have?

ANSWER: The unit prevention leader will:

- a. Design, implement, and evaluate the unit prevention plan.
- b. Assist in new personnel ASAP briefing.
- c. Administer the unit biochemical-testing program.
- d. Inform the commander on the status and trends in alcohol and drug abuse.
- e. Maintain liaison with ASAP counseling center while deployed.
- f. Develop, coordinate, and deliver informed prevention education.
- g. Develop command support for prevention activities by establishing an open, honest, and trusting relationship with unit commanders and subordinate leaders.
- h. Advise and assist unit leaders on all ASAP matters.

Ref: AR 600-85, para 1-27a through h.

CHECK ON LEARNING:

QUESTION: What are four of the nine ASAP objectives?

ANSWER: The objectives of the ASAP are:

1. Increase individual fitness and overall unit readiness.
2. Provide services, which are adequate and responsive to the needs of the total workforce and emphasize alcohol and other drug abuse deterrence, prevention, education, and treatment.
3. Implement alcohol and other drug risk reduction and prevention strategies that respond to potential problems before they jeopardize readiness, productivity, and careers.
4. Restore to duty those substance-impaired soldiers who have the potential for continued military service.
5. Provide effective alcohol and other drug abuse prevention and education at all levels of command, and encourage commanders to provide alcohol and drug-free leisure activities.
6. Ensure all military and civilian personnel assigned to ASAP staffs are appropriately trained and experienced to accomplish their mission.
7. Achieve maximum productivity and reduce absenteeism and attrition among DA civilian employees by reducing the effects of the abuse of alcohol and other drugs.
8. Improve readiness by extending services to the total Army.
9. Ensure quality customer service.

Ref: AR 600-85, chap 1, para 1-30

QUESTION: Who administers the unit biochemical program?

ANSWER: The UPL administers the unit biochemical program.

Ref: AR 600-85, para 1-27

Unless there are any questions about what we just discussed, group 2 will now do their portion of the briefing. The subjects are drug abuse prevention measures; identification, referral, screening and education measures, and the ASAP rehabilitation process.

C. ENABLING LEARNING OBJECTIVE

ACTION:	Identify alcohol and other drug abuse prevention measures.
CONDITIONS:	As a first sergeant, in a classroom, given AR 600-85.
STANDARDS:	Identified the alcohol and other drug abuse prevention measures IAW AR 600-85.

1. Learning Step / Activity 1. Identify alcohol and other drug abuse prevention measures.
Method of Instruction: Conference / Discussion
Technique of Delivery: Small Group Instruction (SGI)
Instructor to Student Ratio: 1:14
Time of Instruction: 10 mins
Media: VGT-12 thru VGT-15

NOTE: Introduce group 2 as the next briefer. Have him/her state each ELO as they begin their briefing on that particular area.

Many people require a significant emotional event to gain their attention. If a soldier is fully aware of life shattering consequences of drug and alcohol abuse, he may turn away from the use or abuse of drugs or alcohol. Remind the students that as first sergeants they must ensure that their soldiers receive an abundance of prevention education.

NOTE: Use the questions and VGTs provided to encourage student interaction. The students should use examples or experiences to emphasize the learning process. Use the following question to stimulate the group leader's briefing.

QUESTION: What is the definition of prevention?

ANSWER: Alcohol and other drug abuse prevention includes all measures taken to deter and reduce the abuse or misuse of alcohol and other drugs to the lowest possible level.

Ref: AR 600-85, para 2-1

NOTE: The instructor may use the following questions and slides to ensure the briefer covers the required lesson content.

SHOW VGT-12, ALCOHOL/DRUG ABUSE PREVENTION OBJECTIVES

**ALCOHOL/DRUG ABUSE
PREVENTION OBJECTIVES**

- Prevent , deter, and reduce alcohol and drug use.
- Provide soldiers with substance abuse prevention and awareness training:
 - ASAP policies and services.
 - Consequences of alcohol/drug abuse.
 - Incompatibility of alcohol/drug abuse with physical/mental fitness, readiness, and Army values

L869/OCT03/VGT-12

Ref: AR 600-85, para 2-2a, b(1), (2), and (3)

NOTE: Ask the students to cite personal experiences as they discuss the objectives. Ensure they discuss the prevention policies.

REMOVE VGT-12

SHOW VGT-13, PREVENTION POLICIES

PREVENTION POLICIES

- Tailored to diverse groups and integrated with other mission-related efforts.
- Emphasize cooperation with the total community and encourage military involvement in drug/alcohol prevention.
- Education/training programs should include the effects and consequences of alcohol/drug use.
- Alcohol deglamorization is an essential element of the Army prevention program.

L869/OCT03/VGT-13

Ref: AR 600-85, para 2-3a, b, c, and d

REMOVE VGT-13

SHOW VGT-14, PREVENTION POLICIES (cont)

PREVENTION POLICIES (cont)

- Commanders/supervisors should have the information and skills to enable early identification of substance abusers.
- Alcohol/drug abuse education conducted throughout the Army Training System.
- Risk reduction prevention supports readiness and is promoted at all levels.
- Installation plan promotes full range of services available and an identified evaluation methodology.

L869/OCT03/VGT-14

Ref: AR 600-85, para 2-3e, f, h, and i

REMOVE VGT-14

NOTE: Ask the following question to get a brief explanation of the risk reduction program (RPP).

QUESTION: What is the Risk Reduction Program (RRP) and what does it provide the commander?

ANSWER: RRP is a critical element of comprehensive installation prevention programs. It provides commanders and human resource personnel with a means of identifying and preventing high-risk problem behavior that can directly impact individual and unit combat readiness. Installation commanders should implement and maintain the RRP to obtain its readiness enhancement benefits.

Ref: AR 600-85, para 2-5

QUESTION: At a minimum, how many hours of substance abuse prevention and awareness training should all soldiers receive?

ANSWER: All soldiers will receive a minimum of four hours of alcohol and other drug abuse training per year.

Ref: AR 600-85, para 2-6a

As a first sergeant, whenever you or your unit leaders appoint a soldier, SGT or above, to a first line supervisor position, you must ensure that he/she attends the supervisory substance abuse prevention and risk reduction education and training.

QUESTION: How soon after assuming a first line supervisor position should the soldier attend the supervisor's substance abuse prevention and risk reduction education training?

ANSWER: The training should occur within 60 days after designation of supervisory/command responsibilities.

Ref: AR 600-85, para 2-6e

QUESTION: How does the Army implement the Alcohol and other Drug Abuse Prevention Training (ADAPT)?

ANSWER: The Army implements alcohol and other drug abuse prevention training through a minimum of 12 hours of instruction, which focuses on the adverse effects, and consequences of alcohol and drug abuse.

Ref: AR 600-85, para 2-6h(3)

NOTE: Ask the students to cite some of their experiences with the ADAPT program. There are four categories of soldiers that may attend ADAPT. Ensure that the students understand that ADAPT is provided to civilians and family members on a space available basis.

Ref: AR 600-85, chap 4, para 4-5b and c, and App C.

NOTE: Allow the students time to discuss but don't dwell on too long.

SHOW VGT-15, ADAPT TRAINING ELIGIBILITY

ADAPT TRAINING ELIGIBILITY

- Those referred and screened but not enrolled in ASAP.
- Those referred, screened, and enrolled in ASAP as part of individual treatment plans.
- Those referred by commander for reasons related to poor performance, behavior, and disciplinary problems.
- Those who volunteer.

L669/OCT03/VGT-15

Ref: AR 600-85, 2-6h(3)(a), (b), (c) and (d)

NOTE: Be sure to transition the group to ELO D and direct the focus to the identification, referral, screening, evaluation, and the rehabilitation team. Have the group leader state the ELO.

CHECK ON LEARNING: Check on learning for this ELO comes after ELO E.

D. ENABLING LEARNING OBJECTIVE

ACTION:	Explain ASAP identification, referral, screening and evaluation procedures.
CONDITIONS:	As a first sergeant, in a classroom, given AR 600-85.
STANDARDS:	Explained ASAP identification, referral, screening and evaluation procedures IAW AR 600-85.

1. Learning Step / Activity 1. Explain ASAP identification, referral, screening and evaluation procedures.

Method of Instruction: Conference / Discussion

Technique of Delivery: Small Group Instruction (SGI)

Instructor to Student Ratio: 1:14

Time of Instruction: 10 mins

Media: VGT-16 thru VGT-18

Drug and alcohol abuse by soldiers usually goes on for a long time before the problem surfaces. A first sergeant should be on top of the program and actively pursue the early identification of alcohol or other drug abusers in his unit to reduce or eliminate the problem quickly.

NOTE: Ask the following question to initiate the discussion. Allow the group leader to answer the question as part of the lead in into ELO D.

QUESTION: Who shares in the rehabilitation team process?

ANSWER: Commanders and the ASAP clinical staff jointly share in the rehabilitation process.

Ref: AR 600-85, chap 3

NOTE: Ensure the students discuss each method of identification and how they can implement it in their unit ASAP.

QUESTION: How can you, as a first sergeant, identify drug abusers in your unit?

ANSWER: There are five ways you can identify drug abusers in your unit:

1. Voluntary (self) identification.
2. Command identification.
3. Biochemical identification.
4. Medical identification.
5. Investigation/apprehension.

Ref: AR 600-85, para 3-1 through 3-5

NOTE: Have the students explain each of the ways.

QUESTION: What are the commander's actions when the medical review officer determines the cause of a positive drug result?

ANSWER: The commander's actions are:

- a. If the MRO determines legitimate medical use, no further action required.
- b. If the MRO determines no legitimate medical use, take actions IAW with paragraph 3-7.

NOTE: The commander has certain referral responsibilities in ASAP. The commander may designate you as his representative to handle occasional referrals actions IAW with paragraph 3-7.

Ref: AR 600-85, para 3-6d(1) and (2)

QUESTION: What are the commander's actions for referring soldiers suspected of alcohol or drug abuse?

ANSWER: See VGT-16 and VGT-17.

SHOW VGT-16, COMMANDER REFERRAL ACTIONS

**COMMANDER REFERRAL
ACTIONS**

- Coordinate with law enforcement on conduct of initial interview.
- If limited use applies, consult with the ADCO and legal advisor.
- If law enforcement does not conduct initial interview, advise the soldier of their rights (ART, 31).
- If law enforcement does not conduct investigation, inform them of the evidence.

L669/OCT03/VGT-16

Ref: AR 600-85, para 3-7a(1) through (4)

NOTE: Ensure the students discuss the bullets and give them examples on how they handle referrals in their units.

REMOVE VGT-16

SHOW VGT-17, COMMANDER REFERRAL ACTIONS (cont)

COMMANDER REFERRAL ACTIONS (cont)

- If law enforcement does not conduct investigation, give soldiers the opportunity to provide additional evidence.
- If law enforcement does not conduct investigation, collect any illegal drugs and paraphernalia that soldiers volunteers.

L669/OCT03/VGT-17

Ref: AR 600-85, para 3-7a(5) and (6)

REMOVE VGT-17

QUESTION: What should the commander do in the case of suspected or identified individuals as alcohol and/or drug abusers, including those identified through urinalysis (except those determined medical use by the MRO) and/or blood alcohol tests?

ANSWER: He should refer them to the ASAP counseling center for screening.

Ref: AR 600-85, para 3-7b

QUESTION: When must the initial screening interview with the ASAP take place?

ANSWER: The initial screening interview with a member of the ASAP counseling center will take place within five duty days after referral.

Ref: AR 600-85, para 3-10

NOTE: Ensure the students discuss who may prescribe treatment, and who determines clinical decisions.

QUESTION: What circumstances (or cases) require a medical evaluation?

ANSWER: A medical evaluation is required in cases of suspected alcohol and or drug dependence, and in all cases prior to entry into an ASAP partial inpatient care program.

Ref: AR 600-85, para 3-11

NOTE: Ensure the students discuss and understand the rehabilitation and treatment procedures.

QUESTION: Who are the members of the rehabilitation team?

ANSWER: As a minimum, the team consists of the soldier, the commander, first sergeant, ASAP clinical staff, and others as appropriate.

Ref: AR 600-85, para 3-12

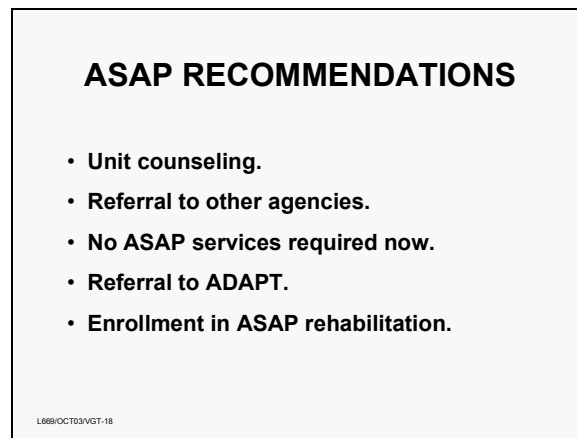
NOTE: Remind the students that usually the commander appoints the first sergeant as his designee.

QUESTION: What actions, with input from the rehabilitation team, may the ASAP clinician recommend to the commander?

ANSWER: See VGT-18

Ref: AR 600-85, para 3-12a, b, c, d and e

SHOW VGT-18, ASAP RECOMMENDATIONS



Ref: AR 600-85, para 3-12a, b, c, d and e

REMOVE VGT-18

We will now discuss the rehabilitation process.

CHECK ON LEARNING: Check on learning for this ELO comes after ELO E.

E. ENABLING LEARNING OBJECTIVE

ACTION:	Identify the ASAP rehabilitation process.
CONDITIONS:	As a first sergeant, in a classroom, given AR 600-85.
STANDARDS:	Identified the ASAP rehabilitation process IAW AR 600-85.

1. Learning Step / Activity 1. The ASAP rehabilitation process
Method of Instruction: Conference / Discussion
Technique of Delivery: Small Group Instruction (SGI)
Instructor to Student Ratio: 1:14
Time of Instruction: 5 mins
Media: VGT-19 and VGT-20

QUESTION: As part of the rehabilitation process, what are the commander's actions?

ANSWER: The commander should:

- a. Ensure soldiers suspected of alcohol/drug abuse problems have an opportunity for evaluation.
- b. Have a full understanding of the various ASAP program elements.
- c. Help soldiers cope with environment in which they function and support soldiers' efforts to avoid relapse.

Ref: AR 600-85, para 4-1a(1), (2), and (3)

QUESTION: What are the ASAP rehabilitation objectives?

ANSWER: See VGT-19.

Ref: AR 600-85, para 4-2

NOTE: Ask the students to cite examples or experiences.

SHOW VGT-19, REHABILITATION OBJECTIVES

REHABILITATION OBJECTIVES

- Return soldiers to full duty.
- Identify soldiers who cannot rehabilitate and advise the commander.
- Assist and refer soldiers who cannot be rehabilitated to a treatment facility where they will reside after discharge.
- Help resolve family alcohol/drug abuse to ensure the soldier performs more effectively.

L869/OCT03/VGT-19

Ref: AR 600-85, para 4-2

NOTE: Talk briefly about the elements and the team concept (paragraphs 4-3 and 4-4).

REMOVE VGT-19

QUESTION: What are the rehabilitation procedures?

ANSWER: See VGT-20.

Ref: AR 600-85, para 4-5 through 4-10

NOTE: While discussing bullet number 2, refer the students to app B, para B-8 to answer the length of the treatment questions that may arise. Ensure the students discuss the return to unit by asking them to interact and relate some of their experiences on this matter.

SHOW VGT-20, REHABILITATION PROCEDURES

REHABILITATION PROCEDURES

- Referral methods, assessment, and treatment determination.
- Rehabilitation/treatment program.
- Rehabilitation progress.
- Type and frequency of treatment.
- Rehabilitation/treatment appointments.
- Return to duty.

L869/OCT03/VGT-20

Ref: AR 600-85, para 4-5 to 4-10

2. Learning Step / Activity 2. Personnel actions during the rehabilitation process

Method of Instruction: Conference / Discussion

Technique of Delivery: Small Group Instruction (SGI)

Instructor to Student Ratio: 1:14

Time of Instruction: 5 mins

Media: None

NOTE: Use the following question to start the discussion about personnel actions during rehabilitation.

QUESTION: Should participation in ASAP interfere with normal administrative duties?

NOTE: Allow the students to briefly discuss paragraphs 5-2 to 5-7 and concentrate on the separation actions. As a minimum, they should discuss the following:

- a. Deployment availability of soldiers in the rehab program.
- b. Drug dependency and detoxification.
- c. Rehabilitation failures.
- d. Discharge proceedings for alcohol/drug abuse when not precluded by the "Limited Use Policy" (Discussed in the next ELO by group 3).
- e. Reenlistment, and Suspension of favorable actions.

CHECK ON LEARNING:

QUESTION: What are the alcohol/drug abuse prevention objectives?

ANSWER: The alcohol /drug abuse prevention objectives are:

- a. Prevent, deter, and reduce alcohol and other drug abuse.
- b. Provide soldiers with substance abuse prevention and awareness training.
 - (1) ASAP policies and services.
 - (2) Consequences of alcohol and drug abuse.
 - (3) Incompatibility of alcohol/drug abuse with physical and mental fitness, combat readiness, and Army values.

Ref: AR 600-85, para 2-2

QUESTION: What are the five types of drug and alcohol abuse identification methods?

ANSWER: The five types of drug and alcohol abuse identification methods are:

- a. Voluntary (self) identification.
- b. Command identification.
- c. Biochemical identification.
- d. Medical identification.
- e. Investigation/apprehension identification.

Ref: AR 600-85, para 3-1

QUESTION: How soon after you refer a soldier for treatment in the ASAP should he have his initial interview?

ANSWER: The initial screening should take place within five duty days after the referral.

Ref: AR 600-85, para 3-10

QUESTION: Who are the members of the rehabilitation team?

ANSWER: Rehabilitation team membership is composed of the soldier, the unit commander, the first sergeant, the ASAP clinical staff, and others as appropriate.

Ref: AR 600-85, para 3-12

BREAK: Time 00:50 to 01:00

The next subject on the agenda is the "limited use policy". This is probably the hardest part to understand and a very important area.

F. ENABLING LEARNING OBJECTIVE

ACTION:	Explain the limited use policy.
CONDITIONS:	As a first sergeant, in a classroom environment, given AR 600-85.
STANDARDS:	Explained the limited use policy IAW AR 600-85.

1. Learning Step / Activity 1. The limited use policy
Method of Instruction: Conference / Discussion
Technique of Delivery: Small Group Instruction (SGI)
Instructor to Student Ratio: 1:14
Time of Instruction: 10 mins
Media: VGT-21 thru VGT-24

Group 3 will now do their portion of the briefing.

QUESTION: What is the objective of the limited use policy?

ANSWER: The objective of the Limited Use Policy is to facilitate the identification of alcohol and drug abusers through self-referral, and the treatment and rehabilitation of those abusers who demonstrate the potential for rehabilitation and retention. Its intention is not to protect a member who is attempting to avoid disciplinary or adverse administrative action.

Ref: AR 600-85, para 6-3

QUESTION: What types of evidence does the limited use policy protect in adverse actions against a soldier?

ANSWER: See VGT-21 and VGT-22.

Ref: AR 600-85, para 6.4a(1 thru 7)

SHOW VGT-21, LIMITED USE POLICY PROTECTED EVIDENCE

LIMITED USE POLICY PROTECTED EVIDENCE

- Results of command-directed biochemical testing inadmissible by military rules of evidence.
- Results of biochemical testing solely as part of limited use in an accident analysis.
- Information collected as a result of a soldier's emergency medical care solely for possible drug overdose.
- Soldier's self referral.

L669/OCT03/VGT-21

Ref: AR 600-85, para 6-4a(1), (2), (3), and (4)

REMOVE VGT-21

SHOW VGT-22, LIMITED USE POLICY PROTECTED EVIDENCE (cont)

LIMITED USE POLICY PROTECTED EVIDENCE (cont)

- Admissions to physician or ASAP counselor during counseling reflecting personal use prior to initial date of referral.
- Biochemical test results if soldier submits to Army treatment prior to a lawful test.
- Results of biochemical test solely as part of rehabilitation or treatment program.

L669/OCT03/VGT-22

Ref: AR 600-85, para 6-4a(5), (6) and (7)

REMOVE VGT-22

QUESTION: What must the commander consider while implementing the limited use policy?

ANSWER: See VGT-23 through VGT-24.

SHOW VGT-23, IMPLEMENTATION OF THE LIMITED USE POLICY

IMPLEMENTATION OF THE LIMITED USE POLICY

- Commander explains limited use policy during commander's interview.
- Soldier's reluctance to assist an overdose victim because they may be abusers themselves.
- Soldiers receive honorable discharge if based on a proceeding where government initially introduced limited use evidence.

L869/OCT03/VGT-23

Ref: AR 600-85, para 6-5a, b, and c

NOTE: Ensure students refer to the reference for discussion.

REMOVE VGT-23

SHOW VGT-24, IMPLEMENTATION OF THE LIMITED USE POLICY (cont)

IMPLEMENTATION OF THE LIMITED USE POLICY (cont)

- Improperly introduced limited use evidence, before the board convenes, reinitiates the elimination proceeding but excludes all reference protected by "limited use policy".
- Bottom line, commander should seek advice from the supporting legal office.

L869/OCT03/VGT-24

Ref: AR 600-85, para 6-5d and e

NOTE: Do not dwell on this too long.

REMOVE VGT-24

NOTE: The Personnel Reliability Program (PRP) requires that those personnel be screened through the initial and continual evaluation assigned to those positions. Ask the following question to ensure that the soldiers understand the requirement for PRP urinalysis testing. Allow a short discussion.

QUESTION: What are the PRP urinalysis testing requirements?

ANSWER: The PRP urinalysis requirements are:

- a. Before certification, all soldiers must submit to a urinalysis screen for illegal drug use.
- b. Certified military personnel performing PRP duties will be tested a minimum of once in a twelve-month period.

Ref: AR 600-85, para 7-5

G. ENABLING LEARNING OBJECTIVE

ACTION:	Identify the biochemical testing procedures.
CONDITIONS:	As a first sergeant, in a classroom environment, given AR 600-85.
STANDARDS:	Identified the biochemical testing procedures.

1. Learning Step / Activity 1. Identify the biochemical testing procedures.

Method of Instruction: Conference / Discussion

Technique of Delivery: Small Group Instruction (SGI)

Instructor to Student Ratio: 1:14

Time of Instruction: 10 mins

Media: VGT-25

Group 3 will now discuss the biochemical-testing program.

NOTE: Ensure students understand that biochemical testing is an excellent way to reduce drug abuse, but it requires strict adherence to procedures to guarantee validity of the testing. Ensure they understand that they should include information on biochemical testing in their unit ASAP. We will not discuss the procedures, as they are a part of the unit program leader's responsibility.

QUESTION: What are the objectives of biochemical testing?

ANSWER: The objectives of biochemical testing are:

- a. Deter soldiers from abusing drugs.
- b. Facilitate early identification of alcohol/drug abuse.
- c. Enable commanders to assess the security, military fitness, good order and discipline of their units and to use information obtained to take appropriate action.
- d. Monitor rehabilitation of those enrolled for alcohol drug abuse.
- e. Collect data on the prevalence of alcohol/drug abuse.

Ref: AR 600-85, para 8-1a, b, c, d, and e

QUESTION: What is the biochemical testing policy.

ANSWER: The biochemical testing policy is that:

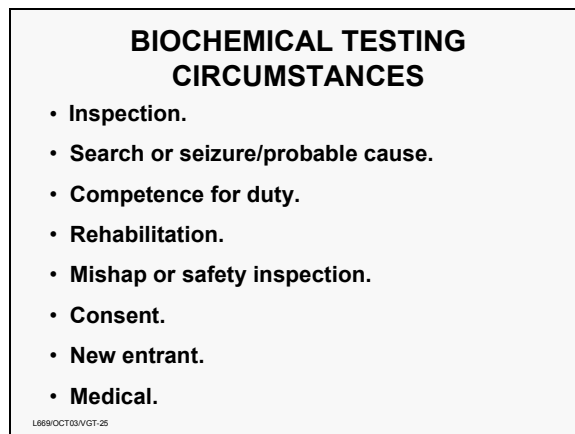
- a. The minimum rate of testing is one random sample per AD soldier per year.
- b. All urine specimen collection conducted IAW appendix E.
- c. All urine specimens forwarded to FTDTL.
- d. Illicit use of anabolic steroids by military members is recognized as an offense under UCMJ.
- e. All confirmed positive drug tests with possible legitimate medical use, reviewed and evaluated by a MRO before taking action against a soldier, prior to suspending access to classified information or reporting to the Central Clearance Facility.

Ref: AR 600-85, para 8-2

The commander decides when to test and organize the testing event. He must understand that an unpredictable testing pattern will produce a more accurate indicator of drug abuse within a particular unit.

NOTE: There are eight circumstances under the biochemical testing program or urinalysis testing of soldiers. Have the students explain each circumstance citing examples.

SHOW VGT-25, BIOCHEMICAL TESTING CIRCUMSTANCES



Ref: AR 600-85, para 8-3

QUESTION: Is a retest of positive urine specimen possible?

ANSWER: Urine specimens may be retested providing a sufficient quantity of the specimen is available.

Ref: AR 600-85, para 8-4a

QUESTION: What are the requirements for retesting urine specimens?

ANSWER: Request all retests in writing. Retesting is allowable upon:

- a. Request of the command, the soldier, or the attorney representing the soldier.
- b. Request by an administrative board.
- c. Court martial order.
- d. A soldier may request a retest outside laboratory system at his own expense).

Ref: AR 600-85, para 8-4

REMOVE VGT-25

2. Learning Step / Activity 2. ASAP PE-1
- Method of Instruction: Practical Exercise (Performance)
 - Technique of Delivery: Small Group Instruction (SGI)
 - Instructor to Student Ratio: 1:14
 - Time of Instruction: 20 mins
 - Media: Practical Exercise-1

NOTE: Direct the students to SH-3, Practical Exercise 1, and allow the students 15 minutes to complete the exercise. Use SPE-1 and allow 5 minutes to discuss the solutions and answer any questions the students may have.

NOTE: This practical exercise will test your learning of the lesson terminal learning objective.

SECTION IV. SUMMARY

Method of Instruction: <u>Conference / Discussion</u>
Technique of Delivery: <u>Small Group Instruction (SGI)</u>
Instructor to Student Ratio is: <u>1:14</u>
Time of Instruction: <u>5 mins</u>
Media: <u>None</u>

Check on Learning

The check on learning questions for each Learning Step/Activity and the Practical Exercise serve as the check on learning for this TSP.

Review / Summarize Lesson

This concludes the class on ASAP. During the last two hours we discussed the ASAP to include identification, referral, rehabilitation, and biochemical testing. You, as first sergeants, must assist your commander in implementing an effective Army substance abuse program. Your direct involvement in the implementation and management of the program will enable you to control drug and alcohol abuse and eliminate those soldiers who do not meet the standards.

SECTION V. STUDENT EVALUATION

Testing Requirements

NOTE: Describe how the student must demonstrate accomplishment of the TLO. Refer student to the Student Evaluation Plan.

You will receive a written examination at the end of this module. You must correctly answer at least 70 percent (28 questions) of the 40 questions to receive a GO. A GO is a requirement for graduation.

Feedback Requirements

NOTE: Feedback is essential to effective learning. Schedule and provide feedback on the evaluation and any information to help answer students' questions about the test. Provide remedial training as needed.

You will participate in an After Action Review (AAR) immediately following the examination for this particular lesson.

Terminal Learning Objective

VGT-1, Terminal Learning Objective

**TERMINAL LEARNING
OBJECTIVE**

**Implement the Army Substance
Abuse Program (ASAP)**

L669/OCT03/VGT-1

Enabling Learning Objective A

Learning Step 1

VGT-2, ASAP Mission/Objectives

ASAP MISSION/OBJECTIVES

- **Increase individual fitness/unit readiness.**
- **Provide services that emphasize drug and alcohol deterrence, prevention , education and treatment.**
- **Implement alcohol/drug abuse risk reduction.**
- **Restore to duty substance-impaired soldiers who have potential for continued military service.**
- **Provide alcohol and drug-free leisure activities.**

L669/OCT03/VGT-2

ASAP MISSION/OBJECTIVES (cont)

- **Ensure personnel assigned to ASAP staff are experienced and properly trained.**
- **Reduce alcohol and drug abuse by civilians to achieve maximum productivity and reduce absenteeism and attrition of civilians.**
- **Improve readiness by extending services to total Army.**
- **Ensure quality customer service.**

L669/OCT03/VGT-3

ASAP PRINCIPLES

- **Alcohol/drug abuse are inconsistent with Army policy and standards.**
- **Commanders intervene early and refer suspected/identified soldiers to ASAP.**
- **ASAP participation is mandatory (Article 86 violation if not attended).**
- **Alcohol/drug abusers may be enrolled in ASAP.**
- **Failure to participate or successfully complete rehabilitation will result in administrative separation.**

L669/OCT03/VGT-4

ASAP PRINCIPLES (cont)

- **ASAP addressed as single program.**
- **Commander retains authority to make decisions.**
- **ASAP available to civilians and dependents.**
- **Aggressive biochemical program serves as a deterrent to drug and alcohol abuse.**
- **High priority given to prevention/education.**
- **Commander will refer individuals involved in alcohol related workplace violence to ASAP.**
- **Law enforcement will not infiltrate nor solicit information from soldiers in ASAP.**

L669/OCT03/VGT-5

ASAP ELIGIBILITY CRITERIA

- **U.S. citizen DOD civilian employees.**
- **Foreign national employees with Status of Forces Agreement treatment arrangements.**
- **Retired military personnel.**
- **Family members of eligible personnel.**
- **Other service personnel when under control of an Army installation commander.**
- **ARNG/USAR not on active duty on a space/resource available basis.**

L669/OCT03/VGT-6

ALCOHOL POLICIES AND CONTROLS

- **Maintain workplace alcohol free.**
- **Alcohol abuse and misconduct not tolerated.**
- **Commanders must educate the soldiers about alcoholism and its effects.**
- **Commanders must identify soldiers that abuse alcohol and refer them for screening, prevention training, and treatment.**
- **Unannounced unit inspections and testing for alcohol.**

L669/OCT03/VGT-7

ALCOHOL SANCTIONS

- **Administrative separation for misconduct involving alcohol, drunk on duty or DWI.**
- **Military on duty will not have alcohol blood level of .05 grams per 100 milliliters of blood.**
- **Detoxify and provide medical treatment to soldiers identified as alcohol dependent.**

L669/OCT03/VGT-8

ILLEGAL DRUGS AND SANCTIONS

**All soldiers, including Title 10 ARNG and USAR,
identified as drug abusers will:**

- **Be referred to ASAP for screening.**
- **Be processed for an administrative discharge
IAW AR 635-200 (except self referrals).**
- **Discharge IAW CH 14, AR 635-200 for drug
trafficking.**
- **Be considered for disciplinary action under
UCMJ.**

L669/OCT03/VGT-9

Enabling Learning Objective B

Learning Step 1

VGT-10, Commanders of Companies/Detachments will:

**COMMANDERS OF COMPANIES/
DETACHMENTS WILL:**

- **Appoint officer or NCO (SGT or above) as Unit Prevention Leaders (UPL).**
- **Implement biochemical testing program.**
- **Implement ASAP prevention and education.**
- **Brief all new soldiers on ASAP policies and services.**
- **Maintain liaison with ASAP clinical and non-clinical personnel.**

L669/OCT03/VGT-10

COMMANDERS OF COMPANIES/ DETACHMENTS WILL: (cont)

- **Maintain ASAP elements while deployed.**
- **Support soldier risk reduction.**
- **Work with Risk Reduction Coordinator.**
- **Immediately report all offenses of illegal possession, use, or referral to the Provost Marshal.**
- **Assess program and provide feedback to the Risk Reduction Coordinator.**

L669/OCT03/VGT-11

Enabling Learning Objective C

Learning Step 1

VGT-12, Alcohol/Drug Abuse Prevention Objectives

ALCOHOL/DRUG ABUSE PREVENTION OBJECTIVES

- **Prevent , deter, and reduce alcohol and drug use.**
- **Provide soldiers with substance abuse prevention and awareness training:**
 - **ASAP policies and services.**
 - **Consequences of alcohol/drug abuse.**
 - **Incompatibility of alcohol/drug abuse with physical/mental fitness, readiness, and Army values**

L669/OCT03/VGT-12

PREVENTION POLICIES

- **Tailored to diverse groups and integrated with other mission-related efforts.**
- **Emphasize cooperation with the total community and encourage military involvement in drug/alcohol prevention.**
- **Education/training programs should include the effects and consequences of alcohol/drug use.**
- **Alcohol deglamorization is an essential element of the Army prevention program.**

L669/OCT03/VGT-13

PREVENTION POLICIES (cont)

- **Commanders/supervisors should have the information and skills to enable early identification of substance abusers.**
- **Alcohol/drug abuse education conducted throughout the Army Training System.**
- **Risk reduction prevention supports readiness and is promoted at all levels.**
- **Installation plan promotes full range of services available and an identified evaluation methodology.**

L669/OCT03/VGT-14

ADAPT TRAINING ELIGIBILITY

- **Those referred and screened but not enrolled in ASAP.**
- **Those referred, screened, and enrolled in ASAP as part of individual treatment plans.**
- **Those referred by commander for reasons related to poor performance, behavior, and disciplinary problems.**
- **Those who volunteer.**

L669/OCT03/VGT-15

Enabling Learning Objective D

Learning Step 1

VGT-16, Commander Referral Actions

COMMANDER REFERRAL ACTIONS

- **Coordinate with law enforcement on conduct of initial interview.**
- **If limited use applies, consult with the ADCO and legal advisor.**
- **If law enforcement does not conduct initial interview, advise the soldier of their rights (ART, 31).**
- **If law enforcement does not conduct investigation, inform them of the evidence.**

L669/OCT03/VGT-16

COMMANDER REFERRAL ACTIONS (cont)

- **If law enforcement does not conduct investigation, give soldiers the opportunity to provide additional evidence.**
- **If law enforcement does not conduct investigation, collect any illegal drugs and paraphernalia that soldiers volunteers.**

L669/OCT03/VGT-17

ASAP RECOMMENDATIONS

- **Unit counseling.**
- **Referral to other agencies.**
- **No ASAP services required now.**
- **Referral to ADAPT.**
- **Enrollment in ASAP rehabilitation.**

L669/OCT03/VGT-18

Enabling Learning Objective E

Learning Step 1

VGT-19, Rehabilitation Objectives

REHABILITATION OBJECTIVES

- **Return soldiers to full duty.**
- **Identify soldiers who cannot rehabilitate and advise the commander.**
- **Assist and refer soldiers who cannot be rehabilitated to a treatment facility where they will reside after discharge.**
- **Help resolve family alcohol/drug abuse to ensure the soldier performs more effectively.**

L669/OCT03/VGT-19

REHABILITATION PROCEDURES

- **Referral methods, assessment, and treatment determination.**
- **Rehabilitation/treatment program.**
- **Rehabilitation progress.**
- **Type and frequency of treatment.**
- **Rehabilitation/treatment appointments.**
- **Return to duty.**

L669/OCT03/VGT-20

Enabling Learning Objective F

Learning Step 1

VGT-21, Limited Use Policy Protected Evidence

**LIMITED USE POLICY
PROTECTED EVIDENCE**

- **Results of command-directed biochemical testing inadmissible by military rules of evidence.**
- **Results of biochemical testing solely as part of limited use in an accident analysis.**
- **Information collected as a result of a soldier's emergency medical care solely for possible drug overdose.**
- **Soldier's self referral.**

L669/OCT03/VGT-21

LIMITED USE POLICY PROTECTED EVIDENCE (cont)

- **Admissions to physician or ASAP counselor during counseling reflecting personal use prior to initial date of referral.**
- **Biochemical test results if soldier submits to Army treatment prior to a lawful test.**
- **Results of biochemical test solely as part of rehabilitation or treatment program.**

L669/OCT03/VGT-22

IMPLEMENTATION OF THE LIMITED USE POLICY

- **Commander explains limited use policy during commander's interview.**
- **Soldier's reluctance to assist an overdose victim because they may be abusers themselves.**
- **Soldiers receive honorable discharge if based on a proceeding where government initially introduced limited use evidence.**

L669/OCT03/VGT-23

IMPLEMENTATION OF THE LIMITED USE POLICY (cont)

- **Improperly introduced limited use evidence, before the board convenes, reinitiates the elimination proceeding but excludes all reference protected by “limited use policy”.**
- **Bottom line, commander should seek advice from the supporting legal office.**

L669/OCT03/VGT-24

Enabling Learning Objective G

Learning Step 1

VGT-25, Biochemical Testing Circumstances

BIOCHEMICAL TESTING CIRCUMSTANCES

- **Inspection.**
- **Search or seizure/probable cause.**
- **Competence for duty.**
- **Rehabilitation.**
- **Mishap or safety inspection.**
- **Consent.**
- **New entrant.**
- **Medical.**

L669/OCT03/VGT-25

Appendix B Test(s) and Test Solution(s) (N/A)

PRACTICAL EXERCISE SHEET PE-1

Title	Army Substance Abuse Program (ASAP)		
Lesson Number/Title	L669 version 1 / Army Substance Abuse Program (FSC RESIDENT)		
Introduction	As a first sergeant, you need to know the ASAP procedures.		
Motivator	The Army Substance Abuse Program (SAP) is important. It will help you; the first sergeant and your commander identify suspected abusers. This practical exercise will assist you in understanding the objectives of the ASAP program.		
Learning Step/Activity	<p>NOTE: The instructor should inform the students of the following Learning Step/Activity requirements. (ELO G.2)</p> <p>At the completion of this lesson, you [the student] will:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Action:</td> <td>ASAP PE-1</td> </tr> </table>	Action:	ASAP PE-1
Action:	ASAP PE-1		
Safety Requirements	None		
Risk Assessment Level	Low		
Environmental Considerations	None		
Evaluation	<ul style="list-style-type: none"> This is not a graded exercise. After completion of the PE, you will receive a solution sheet. As a group, you will discuss the solution and resolve any misunderstandings. It should take you approximately 15 minutes to complete the items. You will discuss the PE during the last portion of the lesson. 		
Instructional Lead-In	<p>ASAP is a personnel program that includes prevention, identification, education, and rehabilitation services. The program includes nonresidential and partial inpatient care program. The ASAP is responsive to the chain of command and supports the morale, safety, and combat readiness of the Army (AR 600-85, pg 68). This lesson will acquaint you with the program and will make it easier for you, as 1sg, to deal with any drug and alcohol problem that you may encounter in your unit.</p>		

Resource Requirements

Instructor Materials:
None.

Student Materials:

- Pen or pencil and writing paper.
 - All reference material issued for this lesson.
 - AR 600-85.
-

Special Instructions

On a blank sheet of paper, record the best answer to the following questions.

You may write out the answer, or put the letter of the best response. If you have time, include the reference in your answer.

Procedures**ITEM 1:**

Two of the objectives of the ASAP are to:

- Publicize adverse consequences of drug and alcohol abuse and encourage cooperation between the military police and the ASAP staff.
- Publicize adverse consequences of drug and alcohol abuse and separate alcohol and other drug abusers from the military.
- Increase individual fitness and restore to duty those soldiers with the potential for continued military service.
- Reduce drug and alcohol abuse and separate all alcohol and other drug abusers from the military.

ITEM 2:

One of the Army substance abuse program's prevention policies is to:

- Provide all members of the military community with the information needed to make responsible decisions about personal use of alcohol.
- Provide all members of the military community with the information needed to make responsible decisions about personal use of drugs.
- Have senior NCOs present training.
- Incorporate training in the unit METL.

ITEM 3:

Two methods to identify alcohol and other drug abuse are:

- a. Biochemical identification and investigation/apprehension.
- b. Command identification and senior NCO identification.
- c. Command identification and suspect behavior.
- d. Medical identification and suspect behavior.

ITEM 4:

When identifying individuals (voluntarily or involuntarily) as abusers of alcohol or other drugs, what are two of the commander's responsibilities?

- a. If law enforcement does not initiate an investigation advise soldiers of their rights and turn them over to the military police.
- b. Collect any illegal drugs the soldiers voluntarily relinquish and segregate the soldiers for questioning by the military police.
- c. If law enforcement does not initiate an investigation, interview soldiers and inform them of the evidence.
- d. Initiate flagging action and advise soldiers of their rights.

ITEM 5:

A requirement for medical evaluation of alcohol or other drug abusers after ASAP screening is to evaluate:

- a. All cases to determine extent of alcohol or other drug abuse.
- b. Cases of suspected alcohol and/or drug dependence.
- c. Illegal drug abusers (including suspected cannabis).
- d. Random cases prior to entry into inpatient treatment.

ITEM 6:

The ADAPT training is implemented through a minimum of:

- a. 12 hours of training.
- b. 6 hours of training.
- c. 18 hours of instruction.
- d. 24 hours of instruction.

ITEM 7:

The areas the commander must evaluate when determining the progress of a soldier in ASAP rehabilitation are:

- a. Drug abuse and lack of motivation.
- b. Duty performance and lack of motivation to overcome alcohol use.
- c. Duty performance, conduct and relationships with other co-workers.
- d. Less incidents of alcohol abuse.

ITEM 8:

When returning a soldier in ASAP rehabilitation to the unit, the commander and other key personnel must:

- a. Assign soldier only duties the ASAP staff recommends.
- b. Encourage soldier to participate in prescribed treatment.
- c. Discourage soldier to participate in unit activities.
- d. Reassign soldier to a different platoon.

ITEM 9:

A drug dependent soldier, as determined by a physician, will be:

- a. Detoxified and processed for deployment.
- b. Suspended and sent to unit.
- c. Detoxified and processed for administrative separation.
- d. Allowed to be a self-referral.

ITEM 10:

One of the requirements for implementation of the Limited Use Policy in the unit is that the commander:

- a. Explains the Limited Use Policy at officer professional development and NCODP classes.
- b. Explains the Limited Use Policy during the commander's interview.
- c. Should seek advice from the battalion adjutant.
- d. Should seek advice from the battalion ASAP NCO.

ITEM 11:

One objective of biochemical testing is to:

- a. Determine how many soldiers are drug free.
- b. Determine the need for ASAP education in the unit.
- c. Collect data on the prevalence of alcohol abuse in the Army.
- d. Validate suspect drug abuse.

ITEM 12:

One of the eight circumstances for urinalysis testing is:

- a. Blood.
- b. Breath.
- c. Competence for duty.
- d. Security clearance.

ITEM 13:

The minimum rate of testing per AD soldier is:

- a. Four random samples per year.
- b. Five random samples per year.
- c. One random sample per year.
- d. Ten random samples per year.

ITEM 14:

Who may request a retest of a positive specimen?

- a. Submitting command, the MRO, the soldier, or his attorney.
- b. Submitting command, the MRO, the soldier, or his immediate family.
- c. The Chaplain.
- d. Local law enforcement.

ITEM 15:

When a soldier requests a specimen retest outside the DOD laboratory system it is:

- a. A responsibility of the command to ensure return of the specimen to DOD control.
- b. A unit responsibility to prepare the specimen transfer request.
- c. An ASAP staff responsibility to initiate the request.
- d. At the soldier's own expense.

**Feedback
Requirements**

You will participate in an After Action Review (AAR) immediately following the examination for this particular lesson.

**SOLUTION FOR
PRACTICAL EXERCISE PE-1**

ITEM 1:

Two of the objectives of the ASAP are to:

- c. Increase individual fitness and restore those soldiers with the potential for continued military service.

AR 600-85, chap 1, para 1-30a and d

ITEM 2:

One of the Army Substance Abuse Program's prevention policies is to:

- a. Provide all members of the military community with the information needed to make responsible decisions about personal use of alcohol.

AR 600-85, chap 2, para 2-3d

ITEM 3:

Two methods to identify alcohol and other drug abuse are:

- a. Biochemical identification and investigation/apprehension.

AR 600-85, chap 3, para 3-1c and e

ITEM 4:

When identifying individuals (voluntarily or involuntarily) as abusers of alcohol or other drugs, what are two of the commander's responsibilities?

- c. If law enforcement does not initiate an investigation, interview soldiers and inform them of the evidence.

AR 600-85, chap 3, para 3-7a(4)

ITEM 5:

A requirement for medical evaluation of alcohol or other drug abusers after ASAP screening is to evaluate:

- b. Cases of suspected alcohol and/or drug dependence.

AR 600-85, chap 3, para 3-11a

ITEM 6:

The ADAPT training is implemented through a minimum of:

- d. 12 hours of training.

AR 600-85, chap 2, para 2-6h(3)

ITEM 7:

The areas the commander must evaluate when determining the progress of a soldier in ASAP rehabilitation are:

- c. Duty performance/conduct and relationships with other co-workers.

AR 600-85, chap 4, para 4-7a

ITEM 8:

When returning a soldier in ASAP rehabilitation to the unit, the commander and other key personnel must:

- b. Encourage soldier to participate in prescribed treatment.

AR 600-85, chap 4, para 4-10d

ITEM 9:

A drug dependent soldier, as determined by a physician, will be:

- c. Detoxified and processed for administrative separation.

AR 600-85, chap 5, para 5-5b

ITEM 10:

One of the requirements for implementation of the Limited Use Policy in the unit is that the commander:

- b. Explains the Limited Use Policy during the commander's interview.

AR 600-85, Chap 6, para 6-5.

ITEM 11:

One objective of biochemical testing is to:

- c. Collect data on the prevalence of alcohol abuse in the Army.

AR 600-85, chap 8, para 8-1e

ITEM 12:

One of the eight circumstances for urinalysis testing is:

- c. Competence for duty.

AR 600-85, chap 8, para 8-3c

ITEM 13:

The minimum rate of testing per AD soldier is:

- c. One random sample per year.

AR 600-85, chap 8, para 8-2a

ITEM 14:

Who may request a retest of a positive specimen?

- a. Submitting command, the MRO, the soldier or his attorney.

AR 600-85, chap 8, para 8-4a(1)

ITEM 15:

When a soldier requests a specimen retest outside the DOD laboratory system it is:

- d. At the soldier's own expense.

AR 600-85, chap 8, para 8-4b

HANDOUTS FOR LESSON 1: L669 version 1

**This Appendix
Contains**

This appendix contains the items listed in this table--

Title/Synopsis	Pages
SH-1, Advance Sheet	SH-1-1
SH-2, Student Notes	SH-2-1 to SH-2-10

Student Handout 1

Advance Sheet

Lesson Hours

This lesson consists of two hours of small group instruction.

Overview

Unit first sergeants play a key role in management of the unit ASAP. This lesson will assist you in ensuring your soldiers stay "fit to fight." It provides you the necessary training to implement and manage an effective unit ASAP. This lesson consists of a before class reading assignment, a practical exercise and a classroom discussion.

Learning Objective

Terminal Learning Objective (TLO).

Action:	Interpret the unit Army Substance Abuse Program (ASAP).
Conditions:	As a first sergeant, in a classroom environment, given AR 600-85 and student handouts.
Standards:	Implement the Army Substance Abuse Program (ASAP) and pass a 40 question, written examination with a score of 70 percent or better IAW AR 600-85.

- ELO A** Identify the Army Substance Abuse Program (ASAP).
 - ELO B** Identify the commander's ASAP responsibilities.
 - ELO C** Identify alcohol and other drug abuse prevention measures.
 - ELO D** Explain ASAP identification, referral, screening, and evaluation procedures.
 - ELO E** Identify the ASAP rehabilitation process.
 - ELO F** Explain the limited use policy.
 - ELO G** Identify biochemical-testing procedures.
-

Assignment

The student assignments for this lesson are:

- Read AR 600-85, Chapters 1 thru 8 and skim App B.

Additional Subject Area Resources

None.

Bring to Class

- Pen or pencil and writing paper.
 - All reference material received for this lesson.
-

Student Handout 2

This handout contains duplicate lesson slides for the students to take notes.

TERMINAL LEARNING OBJECTIVE

Implement the Army Substance Abuse Program (ASAP)

L669/OCT03/VGT-1

ASAP MISSION/OBJECTIVES

- Increase individual fitness/unit readiness.
- Provide services that emphasize drug and alcohol deterrence, prevention , education and treatment.
- Implement alcohol/drug abuse risk reduction.
- Restore to duty substance-impaired soldiers who have potential for continued military service.
- Provide alcohol and drug-free leisure activities.

L669/OCT03/VGT-2

ASAP MISSION/OBJECTIVES (cont)

- Ensure personnel assigned to ASAP staff are experienced and properly trained.
- Reduce alcohol and drug abuse by civilians to achieve maximum productivity and reduce absenteeism and attrition of civilians.
- Improve readiness by extending services to total Army.
- Ensure quality customer service.

L669/OCT03/VGT-3

ASAP PRINCIPLES

- Alcohol/drug abuse are inconsistent with Army policy and standards.
- Commanders intervene early and refer suspected/identified soldiers to ASAP.
- ASAP participation is mandatory (Article 86 violation if not attended).
- Alcohol/drug abusers may be enrolled in ASAP.
- Failure to participate or successfully complete rehabilitation will result in administrative separation.

L669/OCT03/VGT-4

ASAP PRINCIPLES (cont)

- ASAP addressed as single program.
- Commander retains authority to make decisions.
- ASAP available to civilians and dependents.
- Aggressive biochemical program serves as a deterrent to drug and alcohol abuse.
- High priority given to prevention/education.
- Commander will refer individuals involved in alcohol related workplace violence to ASAP.
- Law enforcement will not infiltrate nor solicit information from soldiers in ASAP.

L669/OCT03/VGT-5

ASAP ELIGIBILITY CRITERIA

- U.S. citizen DOD civilian employees.
- Foreign national employees with Status of Forces Agreement treatment arrangements.
- Retired military personnel.
- Family members of eligible personnel.
- Other service personnel when under control of an Army installation commander.
- ARNG/USAR not on active duty on a space/resource available basis.

L669/OCT03/VGT-6

ALCOHOL POLICIES AND CONTROLS

- Maintain workplace alcohol free.
- Alcohol abuse and misconduct not tolerated.
- Commanders must educate the soldiers about alcoholism and its effects.
- Commanders must identify soldiers that abuse alcohol and refer them for screening, prevention training, and treatment.
- Unannounced unit inspections and testing for alcohol.

L669/OCT03/VGT-7

ALCOHOL SANCTIONS

- Administrative separation for misconduct involving alcohol, drunk on duty or DWI.
- Military on duty will not have alcohol blood level of .05 grams per 100 milliliters of blood.
- Detoxify and provide medical treatment to soldiers identified as alcohol dependent.

L669/OCT03/VGT-8

ILLEGAL DRUGS AND SANCTIONS

All soldiers, including Title 10 ARNG and USAR, identified as drug abusers will:

- Be referred to ASAP for screening.
- Be processed for an administrative discharge IAW AR 635-200 (except self referrals).
- Discharge IAW CH 14, AR 635-200 for drug trafficking.
- Be considered for disciplinary action under UCMJ.

L669/OCT03/VGT-9

COMMANDERS OF COMPANIES/ DETACHMENTS WILL:

- Appoint officer or NCO (SGT or above) as Unit Prevention Leaders (UPL).
- Implement biochemical testing program.
- Implement ASAP prevention and education.
- Brief all new soldiers on ASAP policies and services.
- Maintain liaison with ASAP clinical and non-clinical personnel.

L669/OCT03/VGT-10

COMMANDERS OF COMPANIES/ DETACHMENTS WILL: (cont)

- Maintain ASAP elements while deployed.
- Support soldier risk reduction.
- Work with Risk Reduction Coordinator.
- Immediately report all offenses of illegal possession, use, or referral to the Provost Marshal.
- Assess program and provide feedback to the Risk Reduction Coordinator.

L669/OCT03/VGT-11

ALCOHOL/DRUG ABUSE PREVENTION OBJECTIVES

- Prevent , deter, and reduce alcohol and drug use.
- Provide soldiers with substance abuse prevention and awareness training:
 - ASAP policies and services.
 - Consequences of alcohol/drug abuse.
 - Incompatibility of alcohol/drug abuse with physical/mental fitness, readiness, and Army values

L669/OCT03/VGT-12

PREVENTION POLICIES

- Tailored to diverse groups and integrated with other mission-related efforts.
- Emphasize cooperation with the total community and encourage military involvement in drug/alcohol prevention.
- Education/training programs should include the effects and consequences of alcohol/drug use.
- Alcohol deglamorization is an essential element of the Army prevention program.

L669/OCT03/VGT-13

PREVENTION POLICIES (cont)

- Commanders/supervisors should have the information and skills to enable early identification of substance abusers.
- Alcohol/drug abuse education conducted throughout the Army Training System.
- Risk reduction prevention supports readiness and is promoted at all levels.
- Installation plan promotes full range of services available and an identified evaluation methodology.

L669/OCT03/VGT-14

ADAPT TRAINING ELIGIBILITY

- Those referred and screened but not enrolled in ASAP.
- Those referred, screened, and enrolled in ASAP as part of individual treatment plans.
- Those referred by commander for reasons related to poor performance, behavior, and disciplinary problems.
- Those who volunteer.

L669/OCT03/VGT-15

COMMANDER REFERRAL ACTIONS

- Coordinate with law enforcement on conduct of initial interview.
- If limited use applies, consult with the ADCO and legal advisor.
- If law enforcement does not conduct initial interview, advise the soldier of their rights (ART, 31).
- If law enforcement does not conduct investigation, inform them of the evidence.

L669/OCT03/VGT-16

COMMANDER REFERRAL ACTIONS (cont)

- If law enforcement does not conduct investigation, give soldiers the opportunity to provide additional evidence.
- If law enforcement does not conduct investigation, collect any illegal drugs and paraphernalia that soldiers volunteers.

L669/OCT03/VGT-17

ASAP RECOMMENDATIONS

- Unit counseling.
- Referral to other agencies.
- No ASAP services required now.
- Referral to ADAPT.
- Enrollment in ASAP rehabilitation.

L669/OCT03/VGT-18

REHABILITATION OBJECTIVES

- Return soldiers to full duty.
- Identify soldiers who cannot rehabilitate and advise the commander.
- Assist and refer soldiers who cannot be rehabilitated to a treatment facility where they will reside after discharge.
- Help resolve family alcohol/drug abuse to ensure the soldier performs more effectively.

L669/OCT03/VGT-19

REHABILITATION PROCEDURES

- Referral methods, assessment, and treatment determination.
- Rehabilitation/treatment program.
- Rehabilitation progress.
- Type and frequency of treatment.
- Rehabilitation/treatment appointments.
- Return to duty.

L669/OCT03/VGT-20

LIMITED USE POLICY PROTECTED EVIDENCE

- Results of command-directed biochemical testing inadmissible by military rules of evidence.
- Results of biochemical testing solely as part of limited use in an accident analysis.
- Information collected as a result of a soldier's emergency medical care solely for possible drug overdose.
- Soldier's self referral.

L669/OCT03/VGT-21

LIMITED USE POLICY PROTECTED EVIDENCE (cont)

- Admissions to physician or ASAP counselor during counseling reflecting personal use prior to initial date of referral.
- Biochemical test results if soldier submits to Army treatment prior to a lawful test.
- Results of biochemical test solely as part of rehabilitation or treatment program.

L669/OCT03/VGT-22

IMPLEMENTATION OF THE LIMITED USE POLICY

- Commander explains limited use policy during commander's interview.
- Soldier's reluctance to assist an overdose victim because they may be abusers themselves.
- Soldiers receive honorable discharge if based on a proceeding where government initially introduced limited use evidence.

L669/OCT03/VGT-23

IMPLEMENTATION OF THE LIMITED USE POLICY (cont)

- Improperly introduced limited use evidence, before the board convenes, reinitiates the elimination proceeding but excludes all reference protected by "limited use policy".
- Bottom line, commander should seek advice from the supporting legal office.

L669/OCT03/VGT-24

BIOCHEMICAL TESTING CIRCUMSTANCES

- **Inspection.**
- **Search or seizure/probable cause.**
- **Competence for duty.**
- **Rehabilitation.**
- **Mishap or safety inspection.**
- **Consent.**
- **New entrant.**
- **Medical.**

L669/OCT03/VGT-25
